



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

RFW

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| | |
|------------------------|---------------------------|
| Application Number | 10/671,465 |
| Filing Date | 09/29/2003 |
| First Named Inventor | Alex S. Goldenberg et al. |
| Art Unit | 2629 |
| Examiner Name | Moon, Seokyun |
| Attorney Docket Number | IMMR-0091B (034701-562) |

ENCLOSURES (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard 12 Drawing sheets (1 Annotated and 1 Replacement) |
|---|---|--|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|--------|
| Firm | THELEN REID BROWN RAYSMAN & STEINER LLP | | |
| Signature | | | |
| Printed Name | Khaled Shami | | |
| Date | 4/16/07 | Reg. No. | 38,745 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | |
|-----------------------|--------------------|
| Signature | |
| Typed or printed name | Michelle R. Crosby |
| Date | 4/16/07 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT
Serial No. 10/671,465
Atty. Docket No. IMMR-0091B (034701-562)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Alex S. Goldenberg et al. CONFIRMATION NO.: 7950
SERIAL NO.: 10/671,465
FILING DATE: 09/29/2003
TITLE: CONTROLLING HAPTIC SENSATIONS FOR VIBROTACTILE
FEEDBACK INTERFACE DEVICES
EXAMINER: Moon, Seokyun
ART UNIT: 2629

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450, on the date printed below:

Date: _____

4/16/07

Name: _____

Michelle R. Crosby

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND/OR RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action mailed January 16, 2007, please amend the subject application as indicated.

Amendments to the Claims are reflected in the Listing of Claims beginning on page 2.

Amendments to the Specification begin on page 8 of this paper.

Amendments to the Drawings are discussed on page 9 and include both attached replacement sheet(s) and annotated sheet(s) showing changes.

Remarks begin on page 10.